



Pears Home Inspections Ltd. INVOICE

345 Whitman Rd.
Kelowna, B.C.
V1V-1R1
Cell: (250) 717-6434
E-mail- pearshomeinspections@shaw.ca

DATE: July 9/12

INVOICE: 70912A

SUBJECT PROPERTY: 603 Clement

CUSTOMER NAME: Colleen Mackinnon

INSPECTION FEES

Basic Inspection Fee:	\$ <u>375.00</u>
Additional Costs:	\$ _____
Sub-Total:	\$ _____
Fax-Mail-Phone:	\$ _____
Travel:	\$ _____
Sub-Total:	\$ _____
Tax:	\$ <u>45.00</u>

Total Due: \$ 420.00

Please make cheque payable to Pears Home Inspections Ltd.
Payment of this invoice is your acknowledgment that you understand
And agree with the terms of the attached service contract.

FULL PAYMENT IS DUE UPON COMPLETION OF THE INSPECTION

Please remit to: **Pears Home Inspections Ltd.**
345 Whitman Rd.
Kelowna, B.C.,
V1V-1R1



STANDARD CONTRACT
THIS CONTRACT AFFECTS YOUR LEGAL RIGHTS
- PLEASE READ CAREFULLY BEFORE SIGNING -

THIS PROPERTY INSPECTION CONTRACT (the "Contract") made this 9 day of July 2012 between:

Client Name: Colleen Mackinnon Phone #: 867.335.3799 (the "Client")

AND PEARS HOME INSPECTIONS LTD.

(the "Inspector")

in relation to property located at: 603 Clement (the "Subject property")

THE CLIENT AND THE INSPECTOR ACKNOWLEDGE AND AGREE AS FOLLOWS:

- (1) The Client hereby requests that the Inspector perform an inspection of the Subject conditions, each of which are acknowledged, understood and accepted by the Client.
 - 1 The inspection shall be performed in accordance with the Standards of Practice of the Canadian Association of Home & Property Inspectors (BC), a copy of which is attached hereto as Schedule "A" and initialled by the Client,
 - 2 The Inspection Report constitutes an opinion of the Present Condition of the property based on a visual inspection of the readily accessible and visible major systems, components and equipment of the primary Residence on the Property,
 - 3 The inspection and inspection Report do not constitute a guarantee, warranty or an insurance policy,
 - 4 The Client is encouraged to participate in the visual inspection process and accepts responsibility for the consequences of electing not to do so, i.e. incomplete information being available to the Inspector. The Client's participation shall be at the Client's own risk for injuries, falls, property damage, etc.,
 - 5 The condition of certain systems, components and equipment will be randomly sampled by the inspector. Examples of such systems, components and equipment are window/door operation, hardware and screens, electrical receptacles, switches and lights, cabinet/countertop mounts and functions, insulation depth, mortar, masonry, paint and caulking integrity and roof covering materials,
 - 6 Weather conditions may limit the extent of the inspection process; the Client hereby releases and waives any claim it may have against the Inspector for omissions or inaccuracies in the Inspection Report arising as a result of weather conditions existing at the time of inspection,
 - 7 The Inspection Report is for the confidential use of the Client only and will not be disclosed to third parties such as real estate agents, sellers, or lenders without the express written consent of the Client. The Client shall protect and indemnify the Inspector from and against any claim against the Inspector by any such third party arising from disclosure of the Inspection Report thereto; The Client authorizes the Inspector to disclose the Inspection Report to third parties Yes No
 - 8 The Client and the Inspector hereby agree that all disputes arising in relation to the inspection and inspection Report shall be referred to and resolved by binding arbitration pursuant to the applicable legislation governing commercial arbitrations,
 - 9 in the event that the Client claims damages against the Inspector and does not prove those damages, the Client shall pay all legal fees, arbitrator's fees, legal expenses and costs incurred by the Inspector in defence of the claim,
 - 10 The Inspector shall not be liable to the Client for the cost of any repairs to or replacement of any system, component, or equipment undertaken by the client without prior consultation with the Inspector,
 - 11 The Inspector's total liability to the Client for mistakes, errors or omissions in the Inspection and Inspection Report shall be limited to the amount of the fee paid for the inspection.
- (2) By signing this Property Inspection Contract the Client acknowledges, covenants and agrees that:
 - 1 The Client understands and agrees to be bound by each and every provision of this Contract;
 - 2 The Inspector has not made any representations or warranties other than those contained in this Contract;
 - 3 The Client has had such legal advice as the Client desires in relation to the effect of this Contract on the Client's legal rights;
 - 4 The Client shall pay the fees herein before described to the Inspector without set-off or deduction.
- (3) Time limits for legal action:
 - 5 The Client acknowledges and agrees that the time limit for commencement of legal proceedings by the Client against the Inspector for damages suffered by the Client as a result of alleged negligence or breach of Contract by the Inspector shall be not later than one (1) year from the date of the Inspection Report herein before described. From and after the expiry of one (1) year from the date of the said Inspection Report any claim of the Client against the Inspector and or the Inspector's employees, agents and servants arising from or in relation to the Contract and or the services provided hereunder shall expire and cease to exist for all purposes and the Clients right to commence proceedings against the Inspector and or the Inspectors employees agents and servants shall thereupon be barred and cease to exist for all purposes.
- (4) The fee payable at the time of the visual inspection of the Subject Property shall be as follows:

Base Fee: \$ 375.00
Phone / Fax / Mail / Travel: \$
HST: \$ 45.00
TOTAL: \$ 420.00

Client's Signature: X

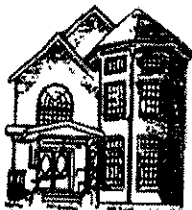
Witness: _____

Inspector's Signature: Brian Pearce

Witness: _____

Company: PEARS HOME INSPECTIONS LTD.

Date: July 9/12



PEARS HOME INSPECTIONS LTD.

345 Whitman Road, Kelowna, BC V1V 1R1

Cell: 250-717-6434

INSPECTION REPORT INDEX

ATTENTION: THIRD PARTIES / OTHER PURCHASERS

Receipt of this report is not authorized by this inspection company. We strongly advise against reliance on this report and recommend that you hire a qualified building inspector to provide you with your own inspection / report.

NOTE: This report is copyrighted. Unauthorized use is strictly prohibited.

PROPERTY INSPECTED

Address 603 Clement
City / Prov Kelowna, B.C.

CLIENT INFORMATION

Client's Name Colleen Mackinnon
Address _____
City / Prov _____
Phone: (B) 867-335-3799 (R)

PARTICULARS OF HOUSE

BUILDING TYPE: ☒ SINGLE FAMILY ☐ DUPLEX ☐ TRIPLEX ☐ CONDOMINIUM
☐ MOBILE HOME ☐ TOWN HOME ☐ INDUSTRIAL ☐ COMMERCIAL ☐ APT. # OF UNITS _____
B.C. REGISTRATION # _____
HOUSE FACING: ☒ NORTH ☐ SOUTH ☐ EAST ☐ WEST
☐ CHECK WITH BUILDING DEPT. FOR VERIFICATION OF ALL NECESSARY PERMITS
ESTIMATED AGE: 80 +/- YRS ESTIMATED SIZE: 1,600 SQ.FT.
HOUSE: ☐ OCCUPIED ☒ VACANT ☐ VACANT, BUT COMPLETELY / PARTIALLY FURNISHED
SOIL CONDITIONS: ☒ DRY ☐ WET ☐ DAMP ☐ FROZEN ☐ SNOW COVERED
WEATHER CONDITIONS: ☒ DRY ☐ RAIN ☐ CLOUDY ☐ SNOW ☐ TEMP
TIME OF INSPECTION: ☒ AM 9:00 ☐ PM _____ DATE July 9/12

PERSON(s) PRESENT AT INSPECTION (OR PORTION OF) None

TYPE OF INSPECTION: ☒ COMPLETE HOUSE ☐ PARTIAL *

* These partial inspections are NOT FULL CAHI HOUSE INSPECTIONS.

DEFINITION OF TERMS

FUNCTIONAL - Performing in the manner intended at the time of inspection, modified by age and conditions within reason.

* **ASTERISK** - beside an item indicates additional attention / repair needed.

SYMBOL - beside an item indicates the requirement of the services of a professional specializing in the specific area of expertise.

This Report details the systems and components found in and outside the home that were visible to the inspector at the time of inspection. These are not based on representations by third parties, opinions as to the adequacy or appropriateness of the design, code compliance, cosmetic or aesthetic considerations. Such questions cannot be addressed within the scope of a home inspection. Any systems or components that were not visible or accessible are not included in this inspection. If you were unable to attend the inspection, please contact the inspector for consultation.



Brad Pears



A. SITE

KEY: ☐ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
* INDICATES ITEMS THAT REQUIRE THE SERVICES OF A PROFESSIONAL SPECIALIZING IN THE SPECIFIC AREA OF EXPERTISE.

DRIVEWAY

☐ Paving Brick ☐ Concrete ☒ Gravel ☐ Asphalt ☐ Other _____

☒ Appears Functional

☐ Cracks - Typical / Major *

Comments: _____

☐ Erosion to Asphalt* / Apply Sealant ☐ Poor Drainage / ponding / driveway slopes towards structure*
☐ Surface Heaved / Settled* / Trip Hazards* / Oil Stains noted ☐ Driveway drain recommended*
☐ Fill in voided areas*

SIDEWALKS

☐ Asphalt ☐ Gravel ☒ Concrete ☐ Paving Brick ☐ Other _____

☒ Appears Functional

☒ Cracks - Typical / Major *

Comments: _____

☒ Surface Heaved / Settled* / Trip Hazards* ☐ Fill in Voided Areas*
☐ Poor drainage / sidewalk slopes towards structure* / Seal house - sidewalk gap *

LANDSCAPE

☐ Maintained ☒ Maintenance Needed* ☐ Incomplete

☒ Leave a 6" drying gap between house & vegetation*

☐ Trees Planted Close to Structure*

NOTE: Low voltage lighting systems are not a part of this inspection

Comments: _____

☒ Trim tree branches from overhanging roof surfaces*
☐ Flower bed(s) trap water along foundation @ _____

FENCES

☐ N/A

☒ Wood ☒ Chain Link / Wire ☐ Wrought Iron ☐ Stucco ☐ Other _____

☐ Appear Functional

☒ Loose / Rotted Posts*

Comments: _____

☐ Vegetation covers fence / unable to fully inspect* ☐ Fences on acreage not inspected
☒ Damaged / Missing Boards* - Repairs / Replace as needed* ☐ Gate Misaligned / Not fully enclosed *

RETAINING WALLS ☒ N/A

☐ Concrete / Stone ☐ Concrete block ☐ Timber ☐ Landscaping feature only ☐ Other _____

☐ Appear Functional

Comments: _____

☐ Leaning / Bulging* / Deteriorated & needs repair* ☐ Drainage openings not evident / add weep holes*
☐ Displacement / Cracks: Typical / Major* ☐ % overgrowth with foliage (uninspected)
☐ Recommend review by geotechnical engineer

PATIO

☒ N/A

☐ Concrete ☐ Asphalt ☐ Brick ☐ Paving Blocks / Tile ☐ Other _____

☐ Appears Functional

☐ Cracks - Typical / Major *

Comments: _____

☐ Moisture Damage - Base of Posts* ☐ Carpet covers patio - could not inspect*
☐ Surface Heaved / Settled* / Trip Hazards* ☐ Seal house / patio junction gap *

DECKS / PORCHES ☐ N/A

☒ Wood ☐ Concrete ☐ Waterproofed Coating ☐ Other _____

☒ Appears Functional

☐ Cracked Membrane* / Loose Boards

☐ Inadequate Framing* / Drainage* / Slopes towards structure #

☐ Handrails: ☐ N/A ☐ Appear Functional

☐ Furniture / Planters on Deck - unable to fully inspect*

☐ No access to unvented cavity (Accelerates Rot Damage) beneath structure, as such - condition cannot be assessed during inspection *

Comments: _____

LOCATION

☐ Front ☐ Side ☐ Rear

☐ Porch / Steps have settled away from house* ☐ Carpet retains moisture - accelerates wood decay

☐ Moisture Damage - Posts / Decks* ☐ Deck on Grade / Carpet - Unable to inspect*

☐ Improper / No visible flashing at House Junction #

☐ Openings in Railings Too Large* / Loose Railings / Missing Railings / Railing Too Low*

☐ Loose Post/Deck Junction / Possible Rot / Repair needed / Keep Sealed *

Note: Waterproof coatings generally last 8 - 10 years *

DECK / PATIO COVER ☒ N/A

☐ Open Design ☐ Same As House (see roof pg.) ☐ Covered Roof / Type: _____

☐ Appears Functional

☐ Weathering noted

☐ Earth to wood contact *

Comments: _____

☐ Evidence of leakage* at: _____

☐ Apparent moisture / insect damage to posts / framing *

☐ Recommend additional support at connections *

☐ Cavity not ventilated #



B. EXTERIOR

KEY: ☒ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
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SIDING

- ☒ Stucco ☒ Wood Clapboards ☐ Concrete Block Brick ☐ Vinyl/Aluminum ☐ Fibrous Siding
☐ EIFS ☐ Formstone ☐ Other _____
- ☒ **Appears Functional** ☐ Vegetation on walls / unable to fully inspect * ☐ Loose / Buckled / warped / bulged siding * at: _____
- ☒ **Cracks** - Typical / Major # ☐ Caulk / seal walls at pipe penetrations * ☐ Evidence of patching **Peeling Paint ***
- ☐ Siding clean / repair / replace / paint * ☐ Fresh paint may obscure past defects * ☐ Recommend patching cracks / gaps / holes
- ☐ Siding embedded in / touching pavement * at: _____ ☐ Earth to wood contact at: _____
- ☐ Firewood should not be stored within or in contact with the structure * ☐ No Steel Lintels / Weep Holes #
- Comments: _____

DOORS (Entry)

- ☐ **Appear Functional** ☒ Weather Stripping Intact / Needs Repairs * ☐ Moisture / insect damage to threshold / jamb / door *
- ☒ **Deadbolts Operational / Non-operational / None *** ☒ Doorbell operational / Non-operational / None *
- Comments: The base of the back door is damaged and will not seal properly.
Repair as necessary. (*)

DOORS (Exterior)

- ☒ Sliding Glass ☐ French ☐ Vinyl Doors ☐ Other _____
☒ Wood ☐ Metal ☒ Wood / Metal / Glass
- ☒ **Appear Functional**
- ☐ Tempered Glass / Unable to determine / Cracked / Broken *
- ☒ **Latching Hardware Operational / Not Operational *** ☐ Damaged / Missing Screen *
- ☐ Difficult to Operate / Adjustment Needed / Damaged / Delamination * ☐ Tracks Functional / Binding *
- ☐ Evidence of Water Intrusion at: _____
- Comments: _____

EXTERIOR STAIRS ■ N/A

- ☒ **Appear Functional**
- ☐ Improper Rise / Run * / Loose Steps * / Damaged Framing / Provide Drain at Base / Open Treads
- ☒ **Handrails Serviceable / Handrails Loose / No Handrails / Openings in Railings too large ***
- ☐ Bottom of wood steps is in contact with the ground, subject to moisture penetration and possible insect invasion *
- Comments: _____

OUTSIDE HOSE FAUCETS

- ☒ **Appear Functional** ☐ Hose bibs turned off from inside structure during winter months are not tested.
- ☐ Inoperational / Loose / Broken / Missing Handles / leaking # ☒ Not Frost protected - Drain in fall *

UNDERGROUND IRRIGATION ■ N/A

- Location of Control Box _____ ☐ Automatic ☐ Manual
- ☐ Not Tested / Non-operational / Winterized * ☐ Readjust spray away from house *
- ☐ **Appears Functional** ☐ Damaged / Deteriorated / Leaking / Broken Head # ☐ Orchard Systems are not tested *
- ☐ Automatic Timers not tested *
- Note: Ensure system is properly winterized in early fall, have Vendor verify winterization. ☐ Check Valve Installed / Not Visible *
- Comments: _____
- Note: Underground Pipes cannot be evaluated for leaks / possible root damage.

Pest Control considerations:

Note: Observations by a home inspector, who is not otherwise specially qualified, regarding evidence of pests is not a substitute for inspection by a licensed pest control operator or exterminator. This report is based on a careful visual inspection of the readily accessible areas of the property. There are areas of the structure which are obstructed and inaccessible. This is not a warranty as to the absence of wood destroying insects. A through wood/pest infestation report is Recommended. **A**

Comments: _____



C. FOUNDATION

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☒ CRAWL SPACE ☐ RAISED FOUNDATION ☐ SLAB ON GRADE ☐ COMBINATION

- ☒ INSPECTION RESTRICTIONS:
☐ SILLS CANNOT BE EXAMINED IN SLAB ON GRADE CONSTRUCTION
☒ ACCESSIBILITY - FULL / PARTIAL / RESTRICTED ACCESS / LOW HEAD ROOM
☒ CONCEALED FOOTINGS - CANNOT BE DETERMINED DURING INSPECTION
☐ EXCESSIVE DEBRIS / STORAGE
☐ FINISHED SECTIONS (DRYWALLED, PANELLER, RIGID INSULATION PANELS)
☐ RECENTLY COMPLETED REPAIRS / RENOVATIONS
☒ NOT INSPECTED DUE TO Unable to access the area under the South addition Not inspected. ☒
☒ ENCLOSED STRUCTURAL FRAMING CANNOT BE EVALUATED
☒ COMMENTS ON UNFINISHED AREAS ONLY - UNABLE TO DETERMINE IF ANY DAMAGE OR WATER BEHIND FINISHED WALLS, FLOORS OR CEILLINGS.

GRADING

☒ Flat Site ☒ Gentle Slope ☐ Steep Slope #

- ☒ Appears Functional
☐ Soil Contacting Stucco / Siding* ☐ Grading not visible due to snow coverage*
☐ Potential Poor Drainage Area / Soil Sloping Towards Foundation / Erosion Visible* at _____
 Comments: _____

NOTE: This inspection does not include geological conditions or site stability information. Yard drains are not tested - underground pipes cannot be judged.

PERIMETER WALLS

- ☒ Poured Concrete ☒ Block Concrete ☐ Brick ☐ Stone ☐ Post/Girder ☐ Other _____
☐ Mobile Home - Wood Framed Skirt ☐ Preserved Wood Foundation (P.W.F.) ☐ No continuous footing*
☐ Appears Functional ☐ Moisture / Stains / Efflorescence / Damage* at: _____
☐ Spalling / Bowled / Deteriorated Mortar # ☐ Honeycombing / Voids noted at: _____
☒ Cracks - Typical / Major # ☒ Anchor Bolts - Visible / Not Visible ☐ Evidence of patching*
☐ Fresh paint may obscure past defects ☐ Earth / Wood Contact #
 Comments: _____

FLOOR

- ☒ Appears Functional ☐ Concrete ☒ Dirt ☐ Vinyl / Carpet ☐ Other _____
☐ Evidence of Moisture / Water Present / Stains / Efflorescence*
☐ Cracks - Typical / Major # ☐ Slab Settlement # ☒ Vapour Barrier Recommended*
☐ NOTE: Basement Drains Are Not Tested* ☐ Recommend Removal of all Wood Fibre / Cellulose Debris ☐ Uneven flooring areas*
☐ NOTE: All slabs experience a certain amount of cracking due to the drying process. Floor coverings prevent detection of settlement in all but the most severe cases. If client removes carpet, the Inspector will reinspect at additional cost.
 Comments: _____

FRAME

- ☒ Joist Size 2 x 6 ☒ Beam Size 6 x 6 ☐ Truss ☐ I. Joists ☐ Partition Wall ☐ Columns
☐ Mobile - Factory Beam Structure ☒ Sub Floor Skid ☐ Temporary Supports / Beams / Columns
☒ Appears Functional ☒ Not Fully Visible ☐ Undermining of piers at: _____
☐ Earth to Wood Contact # ☐ Moisture Evident # ☐ Possible insect damage #
☐ First Floor Structure is partially covered with a basement ceiling. Comments based on visible structure.*
☐ Typical / Excessive sloping of floors due to apparent uneven settlement of posts and piers #
☐ Loose / Improper installation of joist hangers / metal straps at # _____
☐ Additional Posts / Piers recommended at # _____
☐ Inadequate Support for Beams / Joists at # _____
☐ Broken / Cut Framing at # _____
☐ Load bearing ledgerboard not bolted at # _____
☐ See Opposite Page _____
☐ Few / Many Piers do not have footings #
☐ Unsecured / Leaning / Decayed Piers / Posts #
☐ Cantilevers - Water Damage / Excessive Span #
☐ Sagging Floor Joists*
☐ Moisture Damage - sill plate / rim joist #
☐ Past Fire Damage #
 Comments: _____

INSULATION / VENTILATION

- ☒ Appears Functional
☐ Inadequate / Loose Insulation*
☒ Unconditioned crawl space, open vent ports in spring, close in fall
☐ Inadequate Ventilation / Recommend Improvement*
☐ Continuity of Air / Vapor Barrier not verified ☐ Dehumidifier Recommended
 Comments: _____

WATER and/or MOISTURE INTRUSION SYMPTOMS

- ☐ Efflorescence / Stains / Odour* ☐ Swollen / Rotted Materials* ☐ Extensive ☐ Slight
☐ Fungal / Mildew / Mould Growth # ☐ Spring Run Off / High Water Table* ☐ Moderate ☒ None
☐ Floor Water / Water Spots through slab / Damp Foundation Walls* / Occasional Seepage*
☐ Raised Storage / Mechanical Items*
 Comments: _____



D. ROOF

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ACCESS

☒ Inspection By: ☐ Roof Top ☒ Ladder @ Eave Line ☒ From Ground with Binoculars ☒ Top Floor Windows

☒ Limited inspection due to:

☐ Height

☒ Slope

☐ Weather

☐ Solar Panels

☐ Debris

☐ Design

DESIGN

☒ Hip

☒ Dormer

☒ Gable

☐ Mansard

☐ Flat/Low Slope

☐ Gambrel

☐ Shed

ROOF SURFACE OBSERVATIONS

- ☒ Appears Functional within Manufacturer's Lifespan, normally 15 to 22 years ☐ Roofing - Prematurely aged #
- ☐ Regular Maintenance required: consisting of repair / covering bare areas / replacing shingles / sealing flashings *
- ☐ Appears to be improperly installed # ☐ Previous repair work evident ☐ Damage observations as below.
- ☐ Older Roof with evidence of aging / weathering - periodic inspections / maintenance advised, to achieve remaining life expectancy anticipate repairs. ☐ Roof surface sagging #
- ☐ Roof Surface appears to have reached the end of its serviceable life. It can be expected that replacement will be necessary at any time. #
- ☐ Roof was covered partially / fully with debris / moss / snow / ice. ☐ Recommend Valley's cleaned of all debris *

Comments: _____

TYPE

☒

☒ Asphalt / Fibreglass Shingles ☐ Wood Shakes (Cedar - Pine #) ☐ Wood Shingles ☐ Other _____

- ☐ Loose / Missing Shakes / Shingles ☐ Weathering / Aging *
- ☐ Felt Exposed / Surface Granules Wearing # ☒ Number of Layers 1
- ☐ Curled, torn Shingles * ☐ Cracking / Holes / Openings / Brittle # ☐ Ridge Shingles Loose / Damaged / Missing #
- ☐ Exposed Nails * Recommend caulking exposed nail heads. ☐ Few / Many Metal Patches Noted *
- ☐ Crumbly Butt Edges * ☐ Frozen Shingles

Comments: _____

TYPE

☐

☐ Tile

☐ Concrete

☐ Clay

☐ Metal

☐ Other _____

- ☐ Missing Tiles * ☐ Weathering / Aging *
- ☐ Cracked / Loose / Displaced / Damaged Tiles #
- ☐ Ridge Tiles Missing / Damaged #

- ☐ Underlayment deteriorated / Omitted in places / overall #
- ☐ Tiles are only spot checked for attachment

NOTE: Limited inspection - due to possible damage if walked upon.

Comments: _____

TYPE

☐

☐ Tar & Gravel

☐ Membrane (Torch-on)

☐ Rolled

☐ Other _____

- ☐ Blistering / Alligatoring
- ☐ Deteriorated Paper / Open Seams / Buckling #
- ☐ Poor Drainage / Ponding of Water / Bare Areas / Inadequate Slope to Roof Drain #
- ☐ Gravel Build-up / Missing * ☐ Parapet wall - damaged Cap Flashing / Counter Flashing #
- ☐ Regular maintenance required: consisting of repair / sealing of flashing cracks / open seams, bleeding of bubbled sections and covering all bare / exposed felt areas with additional roofing tar & gravel.
- ☐ Spongy in few / many spots *
- ☐ Scuppers / Drains Blocked with Debris *
- ☐ Exposed Nail Heads - Seal

Comments: _____

ROOF COMMENTS:

NOTE: This report is an opinion of the general quality / condition of the Roof. This opinion does not constitute a warranty as to whether the roof leaks OR may be subject to future leakage. ☐ Roof is part of Home Owners Association: Not Inspected at this time.

FLASHINGS

☒ Metal

☒ Composition

☐ Mastic

- ☒ Appears Functional
- ☐ Improperly installed at: _____
- ☐ No visible metal flashing at: _____
- ☐ Loose / uplifted at: _____
- ☐ Recaulking / mastic needed at: Vent pipes / skylight(s) / chimney(s)
- ☐ Drip edge improperly installed *
- ☒ Vent Stacks: ☒ Operational / Non-operational
- ☐ Not entirely visible due to height / debris
- ☐ Flashing was not replaced when roof replaced *
- ☐ Recommend repair / replace at: _____
- ☐ Rusty Flashing *
- ☐ Drip edge flashing advised
- ☐ Damaged / improper vent cap at: _____

Comments: _____



E. ROOF / ATTIC

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SOF FITS / EAVES / FASCIAS

◇ Wood ◇ Metal ◇ Vinyl ◇ Other

☒ Appear Functional

☐ Missing / Loose Sections, peeling paint, repair insect screens *

☐ Moisture Stains, needs repair / replacement

☐ Insufficient Venting

Comments: _____

GUTTERS & DOWNSPOUTS

■ N/A

◇ Metal ◇ Wood ◇ Vinyl ◇ Built-In

☐ Appear Functional

☐ Recommend directing downspouts away from structure *

☐ Clean Gutters - Fall & Spring *

☐ Rusting * / Filled with Debris / Damaged / Loose * / Missing * / Improper Grade * / Resecure * / Leaking at Seams *

☒ Recommend Installing Gutters and Downspouts to Help with Site Drainage *

☐ Subsurface Drains - Not Tested *

Comments: _____

NOTE: Gutters are not probed to determine excessive corrosion and are not tested for leakage or proper slope.

CHIMNEY

■ N/A

◇ Masonry / Stone

◇ Metal

◇ Stucco

◇ Framed

Location

1. Center

2. _____

3. _____

☒ Appears Functional

☒ Only visible from ground due to roof type / height

☐ Cracks or Separations / Settlement / Poorly Sealed *

☐ Spark Arrestor / Rain Cap

☐ Damaged Chimney Cap * / Corroded Metal

☒ Loose / Deteriorated Brick / Mortar / Efflorescence #

☐ Advise Installing Cricket at Chimney

☐ Unlined Flues - Not Safe for Wood Fuels *

Comments: _____

☐ Heavily Cracked - Recommend Service *

SKYLITES

■ N/A

☐ Appears Functional

☐ Sub Standard Installation *

☐ Fixed / Venting (Manual / Automatic)

☐ Improper / missing flashing at: _____

☐ Evidence of Leaking *

Comments: _____

☐ Cracked / broken / fogged glass at: _____

ATTIC

■ N/A

◇ Full

◇ Partial

◇ Vaulted Ceilings

☐ No Visible Access

☐ Accessible

☐ Inspected from Hatch Opening / Low Clearance / Ducting / Storage / Access too small

☐ Secure Exterior Attic Access *

☐ Vapor Barrier

Note: No access to attic corners, eaves, vaulted roof areas.

☐ Roof Sheathing

☐ Yes / No

☐ Not Visible / Incomplete / Improper installation *

☐ Attic hatch not insulated *

☐ Insulation

☐ Plywood / O.S.B.

☐ Shiplap

☐ Strapping

☐ Moisture damage

☐ Batt

☐ Depth _____

☐ Insufficient / Wet / Compressed *

☐ Blown-in

☐ Depth _____

☐ Other _____

☐ Depth _____

☐ Ventilation

☐ Skylite well - Insulated / loose / incomplete *

☐ Soffit Open / Blocked *

☐ Gable Vent

☐ Attic Fan Functional / Not Tested / Not Operational / Recommended

☐ Ridge Vent

☐ Roof Vent

☐ Recommend additional Ventilation *

☐ Damaged / Missing Screens

☐ Permanent year round ventilation equal to approximately one (1) sq. ft. per 250 sq. ft. of Attic floor area should be provided to prevent condensation, especially in winter.

☐ Structure (Roof Framing)

◇ Truss

◇ Rafter

_____ x _____

☐ Collar Ties

◇ Knee Walls

(Ceiling Framing)

◇ Site Built Truss

◇ Joist Size _____ x _____

☐ Damaged Sheathing / Underlayment / Sagging - Broken Framing # at _____

☐ Separation at # _____

☐ Fire Damage noted # _____

Unsafe Wiring Practices # _____

☐ Add Bracing / Support # _____

☐ Roof Structural members, Sheathing and Insulation are visible only at a limited area. Comments based on Visible Structure *

☐ Vent Pipe Disconnected # _____

☐ Chimney (Through Attic) - Eroded Mortar/Water Stains/Open Chase/Recommend Firestopping/Not Visible #

☐ Firewall Evident / Lack of Firewall - Between Units *

☐ Exhaust fan terminates in attic from *

☐ Moisture / Water / Mould Penetration Evidence

☐ Mould / Water Staining * @ Structure / Insulation. See "Moulds" Sheet at rear

☐ Active Leak # _____

NOTE: Do not overload truss chords with storage - not to be used as a storage areas.

Attic Comments: _____



F. INTERIOR

KEY: ☒ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
INDICATES ITEMS THAT REQUIRE THE SERVICES OF A PROFESSIONAL SPECIALIZING IN THE SPECIFIC AREA OF EXPERTISE.

DOORS (Interior)

- ☒ Wood ☐ Metal ☐ Vinyl
☐ French ☐ Sliding (Pocket) ☒ Hollow / Solid Core ☐ Mirrored Doors ☐ Bi-fold
☒ Appear Functional ☐ Damaged * ☐ Needs Trimming/Adjusting * / Undercutting (3/4") ☒ Hardware Operational / Non-Operational
Comments:

WINDOWS

- ☒ Metal ☒ Wood ☐ Vinyl ☐ Single Pane ☐ Dual Pane ☐ Triple Pane ☒ Fixed
☒ Sliding ☐ Casement ☒ Single / Double Hung ☐ Skylight ☐ Louver / Awning
☐ Solariums ☐ Glass Block ☐ Jalousie
☐ Sample Tested Appear Functional ☒ Non-operational / Painted Shut * Several
☐ Damaged Sills / Hardware / Screens Noted * ☒ Cracked / Broken Glass * / Fogged Panes *
☐ Metal Window frames often are the cause of Condensation and a need for maintenance on the interior Window jambs and sills. *
☐ No quick release on security bars * ☐ Recommend Caulking at Exterior Edges *
☐ Security Bars present (not inspected) * ☐ Window Walls Recommended * ☒ Deteriorated Caulking / Putty / Paint *
Comments: Moisture damage to wood frames of storm windows, kitchen window boarded up
NOTE: Lighting Variations / Atmospheric conditions often do not permit detection of dual pane window seal leaks.

CEILINGS

- ☒ Drywall / Acoustic Tile ☐ T-Bar System / Wood ☒ Plaster on Gypsum/Wood Lath. ☐ Other
☒ General Condition Functional ☐ Water Damage / Nail Pops * ☒ Ceiling Fan Functional / Non-Functional / Vibrates *
☐ Substandard Ceiling Height ☒ Settlement / Major Cracking # ☐ Sagging / Bowed # ☐ Minor / Major Truss Uplift #
☐ Stained * - Animal / Water (Active / Not Active during inspection - monitor) / Other ☒ Fresh paint may obscure past defects
Comments:

WALLS

- ☒ Drywall / Concrete ☐ Paneling ☐ Wallpaper ☒ Plaster on Gypsum / Wood Lath
☒ General Condition Functional ☐ Water Damaged * ☐ Stained * ☐ Nail Pops *
☒ Settlement / Seasonal Cracks * ☐ Major Cracking # ☐ Wallpaper Peeling * ☒ Insulation ☒ Yes / No / Not Visible
Comments: ☒ Fresh paint may obscure past defects
NOTE: UFFI Insulation / Hazards are not identified * Conditions inside wall cannot be judged *

FLOORING

- ☐ Carpet ☒ Linoleum/Vinyl ☒ Wood / Laminate ☐ Tile ☐ Marble / Slate / Stone ☐ Other:
☒ General Condition Functional ☐ Damaged / Chipped * ☐ Water Damage * ☐ Bouncy * ☐ Uneven / Sloped *
☐ There is apparent settlement of the floor constructed over an area without adequate ventilation. Expect that the floor is in a deteriorated condition. Not possible to evaluate without removal of a portion of the floor system. Future evaluation will be necessary. *
☒ Some / Much / Stained / Damaged Carpet / Vinyl / Tile * ☒ Squeaky Floor Areas *
☒ All Floors are firm and reasonably level, consistent with the age of this Structure. ☐ Animal odour #
Comments:

NOTE: Furnishings prevent full inspection. Do a careful check on your final walk through.

FIREPLACE (S) ☐ N/A

- ☐ Metal Pre-Fab ☐ Masonry ☐ Roughed-in ☒ Free standing ☐ Insert
LOCATION 1. Living Room 2. 3.
☐ General Condition Functional ☐ Firebox Brick Loose / Need Repointing # ☐ Damper Functional / Rusted / None *
☐ Recommend Regular Maintenance for Creosote Buildup. # ☐ Hearth Functional / Chipped / Cracked / Improper Clearance / Loose *
☐ Wood Stove Clearance - Top / Side / Rear * ☐ Shared Flue # ☐ Have inserts checked for creosote, by removal *
☒ Have Freestanding Wood Heaters Certified for safety / Insurance # ☐ Pilot lites NOT "ON" - NOT TESTED * Have Vendor demonstrate
☐ Recommend Exterior Air Source. * Fireplace and Controls
Comments: Recommend further investigation for the installation of the pellet stove (#)
NOTE: This is not a W.E.T.T. inspection - Recommended.
NOTE: Quality of Chimney draw cannot be determined • Flue inspection • Limited to Visible Areas • Roof Top & Fireplace

ALARMS / STAIRS / SPECIAL FEATURES

- ☒ Smoke Detector Test Button Active / No Response ☒ Recommend Installation Downstair
☒ Interior Stairs Functional ☒ Handrail Present / Loose / None ☐ Loose, Steep, Narrow Steps / Low Headroom * ☐ Rail openings too large *
☐ Central Vacuum System Functional / Non-functional * / Activators Damaged * / Roughed in only ☐ Vacuum Hose Not Tested *
☐ Security System Installed / Water Softner / Water Purifier / Intercom - Not Included in Inspection
☐ Recommend Installation of a Carbon Monoxide Detector
☐ Wet Bar Faucet Functional / Leaking *
Comments:

NOTE: No Comment made on Cosmetic Finishes



G. BATHROOMS / LAUNDRY FACILITIES

KEY: ☒ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
INDICATES ITEMS THAT REQUIRE THE SERVICES OF A PROFESSIONAL SPECIALIZING IN THE SPECIFIC AREA OF EXPERTISE.

Washroom

Locations: Bath #1 Main Bath #2 2pc Bath #3 _____ Bath #4 _____ Bath #5 _____

TOILET

	#1	#2	#3	#4	#5
<input checked="" type="checkbox"/> Appears Functional	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Continually Running	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Moisture / Staining / Soft Subfloor Evident #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Improper Flushing	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Loose Tank / Toilet Base	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Cracked Tank	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Cracked Cover	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Cracked Bowl	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Bidet Functional	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Caulking needed around base	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> New wax seal advised	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

COUNTER & CABINET

	#1	#2	#3	#4	#5
<input checked="" type="checkbox"/> Appears Functional	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Damaged Counter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Caulking Needed at Backsplash	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Damaged Cabinet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Moisture inside Cabinet	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Loose Top / Hinges	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Pedestal - no counter	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

VENTILATION

	#1	#2	#3	#4	#5
<input checked="" type="checkbox"/> Appears Functional	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Exhaust Fan not working	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Exhaust Fan noisy / needs adjustment/Cleaning	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Exhaust Fan vented into Attic. This induces condensation with subsequent damage to Attic Area	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Window sealed shut / Not operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> No visible means of ventilation #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Window only	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Exhaust Discharge to Exterior Not Confirmed	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Heat Source Present	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

NOTE: The watertightness of the Shower Pans is beyond the scope of this inspection.
Tub: Overflows - Not Tested
Leaks / Stains noted in bathroom # _____

Comments: _____

ELECTRICAL

	#1	#2	#3	#4	#5
<input checked="" type="checkbox"/> Appears Functional	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> No Outlet Present/Working #	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Outlet Broken/Loose #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Reverse Polarity at Outlet #	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> G.F.I. Not operational #	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> G.F.I. Recommended in all Bathroom Wall Outlets	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Outlet within Reach of Tub / Shower #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Razor outlet only	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> # _____ Resets at _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

SINK

	#1	#2	#3	#4	#5
<input checked="" type="checkbox"/> Appears Functional	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Sink Chipped / Cracked	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Dripping / Leaky Faucet	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Poor Flow Volume	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Poor Drainage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Corroded / Loose Pipes	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input checked="" type="checkbox"/> Damage / Corrosion: Underside of Sink	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Shut Off Valves Present	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Pop Up Valve Repair / Missing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Leaking Pipe Connections	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Evidence of Past Leakage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> No Overflow Drain	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Not Secured to Counter / Wall	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Water Taps Reversed - Safety Hazard #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

TUB/SHOWER

	#1	#2	#3	#4	#5
<input checked="" type="checkbox"/> Appears Functional	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Leaking at Fixtures	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Non Operational Shower Diverter	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Poor Flow Volume	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Poor Drainage	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Needs Recaulking	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Moisture Damage to Walls	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Moisture Damage to Floor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Damaged _____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Jetted Tub Operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Access Door to Jetted Tub Mechanical	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Shower Glass Enclosure may not be Tempered Glass	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Drain Stopper not Operational	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Seal Tub / Floor Junction	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Seal Tub Spout & Tub / Shower Assembly	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Window is Located in Shower Enclosure;	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Protection of Window is Required @	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Water Taps Reversed - Safety Hazard #	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Disinfect Jetted Tub & Piping on a regular basis	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

LAUNDRY FACILITIES

LOCATION

☒ Utility Room ☐ Basement ☐ Garage ☐ Other _____

<input checked="" type="checkbox"/> Plumbing Appears Functional	<input type="checkbox"/> Leaking / Floor Water
<input checked="" type="checkbox"/> Electrical Outlet Grounded / Non-Operational * / G.F.I. Recommended #	(W) Make <u>Whirlpool</u> Model <u>1085</u>
<input checked="" type="checkbox"/> Dryer Venting Functional	(D) Make <u>Moffat</u> Model <u>3691</u>
<input type="checkbox"/> Laundry Tub Functional / Leaking / Not Provided	<input type="checkbox"/> Not Provided / Vents in Attic / Crawl Space
<input type="checkbox"/> Provision for Standard Size Appliances (approx. 60")	<input type="checkbox"/> Recommend venting to exterior
Comments: _____	<input type="checkbox"/> Faucet Functional <input type="checkbox"/> Leaking / Missing Handles

Note: Washing Machines / Dryers are not tested / moved during inspection - condition of floors underneath cannot be judged.



H. KITCHEN

KEY: ☒ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
☒ INDICATES ITEMS THAT REQUIRE THE SERVICES OF A PROFESSIONAL SPECIALIZING IN THE SPECIFIC AREA OF EXPERTISE.

GENERAL KITCHEN

COUNTERS

- ☒ Plastic Laminate ☐ Tile ☐ View of Counter Restricted: Dishes, appliances
☒ Appears Functional ☐ Wood ☐ Solid (Corian, Granite, Marble) ☐ Other _____
Comments: ☒ Minor / Heavy Wear* ☐ Moisture Damage* ☐ Backsplash needs recaulking *

CABINETS

- ☐ Plastic Laminate ☒ Wood ☐ Other _____
☒ Appears Functional ☒ Minor / Heavy Wear* ☐ Moisture Damaged*
Comments: ☐ Misaligned / Loose Brackets / Hinges* ☐ Handles Missing / Broken *

ELECTRICAL

- ☒ Appears Functional ☐ G.F.I. Functional / Non Operational* ☐ Reverse Polarity #
☒ G.F.I. Recommended at all Outlets within 6 feet of any sink*
☐ Damaged Lighting Panels* ☒ Ungrounded Outlets #
Comments: _____

FLOORING

- ☐ Carpet ☐ Vinyl / Linoleum ☐ Resilient Tile ☐ Ceramic Tile ☒ Wood / Laminate- ☐ Other _____
☒ Appears Functional ☐ Moisture Damage* ☐ Stained Covering* ☐ Raised Seams* ☐ Sloped Floor # ☐ Damaged: Medium/Heavy*
Comments: _____

SINKS

- ☒ Single / Double ☐ Stainless ☒ Porcelain / Plastic ☒ View below sink - restricted by supplies, etc.*
☒ Appears Functional ☐ Damaged Medium / Heavy* ☐ Poor Drainage / Evidence of Past Leakage below Sink
☒ Faucet Functional / Leaking / Loose / Inoperative* ☒ Waste Plumbing Functional / Leaking / Improperly Plumbed # / Loose / Corroded #
☐ Sprayer hose functional / Inoperative* ☐ Recommend Counter / Sink connection is sealed*
Comments: _____

APPLIANCES

RANGE / COOKTOP

- ☒ Appears Functional ☐ Inoperative / No Test* ☐ Oven Door / Gasket Seal Functional / Damaged*
☐ Improper Stove Clearance Top / Side / Window # ☐ Gas Shut Off not Visible / Provided #
Comments: _____

MAIN: Range (Make) Whirlpool Model 1467 Allowance _____
Cooktop (Make) _____ Model _____ Allowance _____
SUITE: Make _____ Model _____ Allowance _____
☐ Gas ☒ Electric ☐ Other _____

RANGE HOOD

- ☐ Ductless (Filter) Recirculating ☐ Vented to outside ☐ Microwave Built-in
☒ Appears Functional ☐ Inoperative* ☐ Loose Connections / Noisy / Missing Filter* ☒ None Installed*
Comments: _____

Note: Self and/or continuous cleaning operations, timers, lights & clocks are not evaluated during this inspection.

These appliances were present at the time of inspection but were not inspected.

- ☐ Garbage Disposal Unit ☐ Microwave
☐ Trash Compactor ☒ Refrigerator MAIN: Make Inglin Model E709 Allowance _____
☐ Water Purifier / Ice Maker SUITE: Make _____ Model _____ Allowance _____
☐ Instant Hot Water Heater ☒ Dishwasher Make Amica Model 14 EV Allowance _____
☐ Drain Line is improperly installed # / Not Visible*
Comments: _____



I. PLUMBING

KEY: ☐ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
INDICATES ITEMS THAT REQUIRE THE SERVICES OF A PROFESSIONAL SPECIALIZING IN THE SPECIFIC AREA OF EXPERTISE.

WATER HEATER

LOCATION: ☐ Utility Room ☐ Basement ☐ Garage (Must be 18" above floor) ☐ Closet ☐ Other _____

Unit A Make John Wood Est. Age / Capacity 11 yrs / 17.5 liter Gas / Electric / Oil / Solar / Other Electric
Unit B _____

- ☒ Older Unit(s) may have limited life. Failure Probability is High *
☒ Water Shut-Off Valve installed ☐ Broken / Corroded / Missing # ☒ Vacuum Release valve Yes / No
☒ Tank Appears Functional ☐ Leaking / Rusting / Corroded / Scorch Marks # ☐ Covered with Thermal Wrap
☒ Pressure Relief Valve Installed / Not Tested / Not Provided # ☐ Hot Water Circulating System
☒ Discharge Line Functional / Not Provided # ☐ Recommend Extension of Pipe to within 6" of floor *
☐ Vent Pipe Flue / Leaking / Loose / Damaged # ☐ Deteriorated Sections - Repair / Replace / Backdrafting Noted #
☐ No Gas Line Drip Leg # ☐ Negative / Reverse Slope on Vent Pipe Flue # ☐ Improper Clearance from Combustibles #

Comments: _____

NOTE: WATER HEATERS GENERALLY LAST 9 - 14 YEARS

MAIN ENTRANCE LINE

- ☒ Appears Functional ☐ Lead ☐ Galvanized ☐ Plastic (PVC - PB) ☒ Copper ☐ Other _____
☒ Main Valve Location: Crawl Space ☒ Supply: Public / Private ☒ Estimated Interior Diameter 1/2"
☐ Valve Leaking / Corroded / Broken Handle * ☒ Shut Off Valve Functional / Non-Operational / Not Tested / Unable to Locate *
☐ Recommend Heat Tape (Mobile Home) is replaced ☒ Water Pressure (PSI) 45 (Above 80 psi - adjustment recommended) *
☐ No Main Water Regulator ☐ Copper Pipe - No Protection from Concrete

Comments: _____

Note: Main entrance line is viewed at interior wall penetration only. Water softeners are not a part of this inspection.

SUPPLY PIPES

- ☒ Appears Functional ☒ Galvanized ☐ Plastic (PVC - PB - CPVC) ☒ PEX ☒ Copper/Brass ☐ Black Pipe ☐ Other _____
☐ Dielectric Fittings Needed # ☐ Damaged Pipes / Corroded / Leaking / Loose / Insufficient support * ☒ Freeze Vulnerable Pipes
☐ Water Hammer # ☐ Disimilar Metals in contact - Recommend Correction #
☐ There are some old water lines in service. Some water lines have been replaced. Suggest upgrading old water lines, as needed. It is common for old water lines to affect water pressure in dwellings of this age. * ☐ Gas Meter not tested
☐ Loss of water flow when 2 or more fixtures used # ☐ Cross Connections at # _____
☒ % of Estimated Galvanized Piping 90%

Comments: _____

Note: Underground Pipes / Pipes inside walls cannot be evaluated for leaks / corrosion / proper size.

DRAIN / WASTE / VENT

- ☒ Appears Functional ☐ Galvanized ☒ Plastic (ABS-PVC) ☒ Copper ☒ Cast Iron/Lead * ☐ Other _____
☐ Rust / Corroded Lines * / Leaking Lines # ☐ *S*Traps *
☒ Improper Slope for drainage / Insufficient Support # ☐ Gurgling drain may indicate improper venting / Have Corrected #
☒ Plumbing Vents appear Functional ☒ Stacks through Roof ☐ Vents damaged / Vents into Attic #
☒ Unable to fully view vent pipes * ☐ Vent stack opens below roof * ☐ Odor, Back up, Unsealed openings #
☒ Floor drain ☒ Utility area / Water tank overflow pan / Not visible ☐ Add Cover ☐ Flush to check
☒ Main waste clean-out ☒ Stack / Concealed / None / Exterior / Floor ☐ Replace Plug ☐ Provide access to or add accessible clean-out
☐ Sewage Ejector Pump - Location _____ ☐ Pump Not Inspected / Noisy / Inoperative *

Comments: _____

SUMP PUMP

☒ N/A

Location: _____

- ☐ Appears Functional ☐ Pump Discharges to _____
☐ Needed / Non Operational ☐ Operate Sump to ensure proper operation before rainy season.

Comments: _____

NOTE: Basement Drains are not tested *

- ☐ Note: Numerous examples of unprofessional workmanship were noted in the plumbing system. This increases the probability of hidden and unnoted deficiencies and various types of system failures.*

Comments: _____



J. HEATING

KEY: ☐ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
☒ INDICATES ITEMS THAT REQUIRE THE SERVICES OF A PROFESSIONAL SPECIALIZING IN THE SPECIFIC AREA OF EXPERTISE.

LOCATION / TYPE

LOCATION(S) #1 Variable #2 _____ #3 _____
 HEATING TYPE ☒ Radiant ☐ Forced Air ☐ Wall ☐ Heat Pump ☐ Boiler / Steam ☐ Gravity ☐ Floor ☐ Other: _____
 FUEL TYPE ☐ Electric ☐ Natural Gas ☐ Wood / Coal ☐ Propane ☐ Oil ☐ Other: _____
 ESTIMATED BTUs: #1 Variable #2 _____ #3 _____ ESTIMATED AGE: Old
 EFFICIENCY: ☐ HIGH ☐ MEDIUM ☒ CONVENTIONAL

GENERAL CONDITION / BURNERS

- ☒ Appears Functional
- ☐ Is relatively old, may have limited life at: # _____
 - ☐ This Unit is a closed system making it impossible to inspect *
 - ☐ Pilot not lit / Untested *
 - ☐ Recommend cleaning / servicing blower motor / pilot / vent system / burners #
 - ☐ Gas heater in bedroom / advise evaluation for safety #
 - ☐ Flame roll-out / scorching signs #
 - ☐ Above 65° / Heat cycle not operated to prevent system damage #
 - ☐ Fan Belt loose / worn *
 - ☐ Loose / Burned Wiring *
 - ☐ High Efficiency Condensate Lines Discharges to _____
 - ☐ Exterior Air Temperatures Prevented Furnace from starting *
 - ☐ No response to normal controls #
 - ☐ Excessive / Unusual noise during operation #
 - ☐ High / Low pressure / Temperature #
 - ☐ Evidence of leakage at boiler / pipe fittings #
 - ☐ Return air supply from attic / crawl space #
 - ☐ Electric ignition malfunctioning #
 - ☐ Unit keeps cycling / fan operates sporadically #
 - ☐ Pulley adjustment needed / Vibration *
 - ☐ Rust Flakes / Soot / Unusual Flame #
 - ☐ Direct drive motor - no belt

* NOTE: The Inspector does not ignite (Pilots). Please ensure that all heating systems are activated at time of inspection.
 * Buried External Oil tanks cannot be inspected and are beyond scope of this inspection.

The Heat Exchanger in a furnace is mainly hidden from view, it cannot be fully examined and its condition determined without being disassembled. Since this is not possible during a visual inspection, we recommend a heating contractor check the condition of heat exchanger before contract settlement.

Comments: _____

VENTING ☒ N/A

- ☐ Appears Functional
- ☐ Defective barometric / vent damper / induced draft fan at: _____
 - ☐ Terminates below / near window - hazard at #: _____
 - ☐ Vent pipe too short at roof at: # _____
 - ☐ Moderate / excessive corrosion at inducer fan at: _____
 - ☐ Unable to fully inspect vent(s)
 - ☐ Soot / rust noted in vent pipe / chamber at* _____
 - ☐ Excessive corrosion at vent pipe / draft diverter at* _____
 - ☐ Asbestos like materials may have been used in heating system #
 - ☐ Pipe Clearance inadequate / Back Venting / Improper Vent Angle #

Comments: _____

COMBUSTION AIR ☒ N/A

- ☐ Appears Functional
- ☐ No / Insufficient air supply for combustion at #: _____
 - ☐ Vents Blocked / Missing #
 - ☐ Return Air / Combustion Air in danger of mixing #

Comments: _____

CONTROL MECHANISM

- ☒ Appears Functional
- ☐ Control / gauges need repair / replacement #
 - ☐ Radiant heat doesn't shut off completely #
 - ☐ Expansion tank leaking / waterlogged / rusted #
 - ☐ Furnace Safety Switch not visible #
 - ☐ Solar System: Operating Yes / No
 - ☐ Damaged / Broken / Loose Thermostat *

Comments: _____



J2. HEAT / COOLING

KEY: ☒ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
☒ INDICATES ITEMS THAT REQUIRE THE SERVICES OF A PROFESSIONAL SPECIALIZING IN THE SPECIFIC AREA OF EXPERTISE.

DISTRIBUTION SYSTEM ☐ N/A

☒ Appears Functional

- ☐ Unable to locate heat supply at *
- ☐ Damaged / Loose / Crushed Ductwork #
- ☐ Registers Blocked / Missing *
- ☐ Zone Valve not Operational #
- ☐ Circulating Pump Noisy / Leaking / Not Operational #
- ☐ Radiator / Convactor Cold / Not Operational #
- ☐ Slab Ducting *
- ☐ Missing / Dirty Filter *
- ☐ Humidifier - Functional / Non-functional - clean twice a year
- ☐ Heat recovery ventilation system
- ☐ Recommend wrapping duct work with insulation *
- ☐ Recommend insulation between hot air ducts and wiring *

- ☒ Duct Work ☒ Pipes / Radiators ☒ Pipes / Convectors
- ☒ Electric / Baseboard ☒ Other _____

- ☐ Insufficient Support of Ducting *
- ☐ Low Volume of Air *
- ☐ Possible Asbestos Noted *
- ☐ Undercut Doors - Improves circulation
- ☐ Leaking Radiator convactor / fitting #
- ☐ Corrosion Noted at # _____
- ☐ Secure Baseboards / Keep Draperies clear
- ☐ Filters should be changed several times during the heating/cooling season
- ☐ Electronic Filter Functional / Non-Functional / Not Tested*
- ☐ Dirty / Loose Connections *
- ☐ Recommend Heating Cables on Pipes in Unheated areas

NOTE: Determining the actual presence of Asbestos (used before 1980), can only be done by specialists & is beyond the scope of this visual inspection.
All Asbestos should be professionally sealed, encapsulated or removed.

Comments: No baseboard heater in the living room

COMPRESSOR / CONDENSER ☐ N/A

- ☒ Location _____ Make _____
- ☐ Appears functional ☐ No Power / Damaged *
- ☐ Outside Air Temperature below 65°. Compressor may be damaged if activated at this time *
- ☐ Noisy / Damaged Fins / Leaking Oil / Dirty / Iced up *
- ☐ Unit must be kept free of leaves / debris and kept level *
- ☐ Temperature Differential too high / low at # _____

- ☒ Part of Heat Pump ☒ Window / Wall mount (not inspected)
- ☒ Electric ☒ Gas - Not Inspected * ☒ Evaporative Cooler

- ☐ Older unit / may be nearing end of expected life *
- ☐ Data Plate missing / not legible *
- ☐ Dryer Vent too close to unit *

- ☐ R.L.A. _____
- ☐ AMPS. _____
- ☐ Approximate Tonnage _____

Comments: _____

ELECTRICAL

- ☒ Electrical Disconnect present ☒ Location _____
- ☐ No Disconnect switch located within sight and reach of compressor. Recommend installation of Switch # _____

Comments: _____ ☐ Loose / Improper Wiring # _____

EVAPORATOR

- ☐ Not Accessible ☐ Leaking / Dirty / Loose Mounting * ☐ Condensate Line _____

REFRIGERANT LINES

- ☐ Appears Functional ☐ Damaged / No Insulation * / Leaking * ☐ Not fully visible ☐ Ice on Unit / Lines *
- ☐ Termination Point _____
- ☐ Damaged / Leaking / Disconnected / Obstructed _____

AIR DISTRIBUTION

- ☐ Appears Functional ☐ Improper Size * ☐ Damaged / Leaking / Disconnected *
- ☐ Recommend Servicing System and Checking Refrigerant Level *

EVAPORATIVE COOLER ☐ N/A

- ☐ Appears Functional ☐ One / Two Speed Motor ☐ Roof Jack Condition Functional / Damaged *
- ☐ Damper Location _____ ☐ Aging / Leaking / Loose / Rusting / Inoperative *

Comments: _____

Note: Pressure tests not performed on coolant systems; no representation is made regarding coolant charge or line integrity. Judgement of system capacity / efficiency is beyond the scope of this inspection. System should be serviced before cooling season.



K. ELECTRICAL

KEY: ☒ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
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SERVICE ENTRANCE

- ☒ Appears Functional ☐ Service Entrance not sealed # ☐ Drip Loops damaged / frayed #
☐ Loose Masthead # ☐ Service Entrance Cable is not properly attached to exterior wall #
☐ Service Entrance Cable sheathing is deteriorated. Replacement is needed for safety #
☐ Cables too close to ground # ☐ Cables through Trees # / Contact Power Authorities ☐ Improper Splices / Taps #
☐ Comments _____ ☐ The Electric Service is not grounded #

MAIN / SUB PANELS

- Location (Main) Front Porch # of Circuits 15 ☒ Breakers / Fuses
 (Sub) _____ # of Circuits Load Mixer ☒ Breakers / Fuses
 (Sub) _____ # of Circuits _____ ☒ Breakers / Fuses
- ☒ Appears Functional ☐ Estimated Amps _____
☐ Main Cables Double Lugged / Tapped: Circuit Unprotected # ☐ Cannot determine / No main breaker / Unable to remove cover *
CABLE TYPE: ☒ Power Cable ☒ Copper / Aluminum ☐ Older system with modifications
☒ Branch Cable ☒ Copper / Aluminum ☐ More than 6 Breakers with no Main Shutoff #
☐ Missing Deadfront Cover # ☒ Expansion Room Yes ☐ Recommend wire nuts for loose wires #
☒ Grounding System Functional ☐ Loose / Corroded Clamp # ☐ Unable to Locate #
☐ Larger Circuits have Aluminum conductors (8 gauge or larger - i.e. Stove, Hot Tub) This is not uncommon, if proper connectors are used at each termination; this type of wiring should not cause concern.
☐ Recommend verification of proper grounding # ☐ Sub Panel more than 10' from main panel - Disconnect required #
☐ Ground and Neutral Wires not separated at Sub-Panel # ☐ Breaker off at Panel * / Have reason verified
☒ Unprotected Panel Openings * ☐ Missing Bushings / Clamps *
☐ No apparent bonding of Ground Bus Bar at # _____ ☐ Missing Fuses *
☒ There are two (2) wires attached to some terminals. Condition not hazardous but may result in nuisance tripping
☐ Breakers / Fuses appear over-sized and unsafe for wire size. An Electrician should determine correct size of Breakers / Fuses. #
☐ Single Conductor Aluminum Wire has been used for interior wiring of (some / all) branch circuits. Recommend that a qualified electrician evaluate all working connections. # ☐ Antioxidant Recommended on Aluminum 240 Connections #
☐ Knock outs open # ☐ Melted/Scorched Insulation # ☐ Water / Rusted Connection in Panel #
☐ A _____ AMP Service is not adequate for today's Electrical/future expansion demands. If present service is not suitable, you should upgrade electrical service amperage. #
☒ Amateur workmanship evident # ☐ Maintain 40" clearance in front of panel for proper access / Poor Location #
☒ Comments Improper wire used in the panel. Recommend having it checked & repair or replaced. ☒

SWITCHES / RECEPTACLES

- ☒ Appears Functional
☐ Exposed Wire Termination at # _____
☐ G.F.I.'s Operational / Not Operational at: _____
☐ All exterior, garage, bsmt. & washrm should be ground fault interrupter (G.F.I.) type *
☐ Non-operational Switches/Receptacles observed at # _____
☒ Reverse Polarity plugs observed at # laundry Area
☐ Loose / Scorched / Painted receptacles observed at # _____
☒ Improper / Exposed Wiring observed at # Several Areas
☐ Recommend the installation of additional Outlets, as necessary, to avoid the misuse of extension cords # @ _____
☐ Occupants belongings prevent testing of all outlets and switches *
☐ Overloaded / Missing Junction Box at # _____
☐ Two-prong (ungrounded) type receptacles noted - standard at the time of installation. Eventual upgrading may be desirable *
☐ Older "Knob and Tube" / Cloth-covered wiring noted / This system is still commonly found but is old and may eventually need replacement
☐ "Knob and Tube" Wiring covered with insulation in attic / Recommend evaluation by licensed electrician for safety #
☐ Damaged / frayed / taped "Knob and Tube" Wiring at # _____ ☐ Recommend that insulation not be installed over "Knob and Tube" wiring in attic #
☐ Improper / Unsafe method of splicing into "Knob and Tube" wiring # ☒ Surface mounted wire - unprotected *
- ☐ "Octopus" Wiring Noted *
☐ Exterior fixtures open to weather #
☒ Missing cover plates *
☒ Function of some switches was not determined *
☐ Shortage of outlets at # _____
☐ Frayed Appliance wires #
☐ Non Polarized / Ungrounded Adapters #
☒ 3 prong outlets not grounded *
☒ All splicing - secure in junction box Various Areas

NOTE: G.F.C.I. (Ground Fault Circuit Interrupter) protection has been required in recent years for safety in wet areas - older buildings are typically not equipped with these devices but retrofitting is recommended. * Low-voltage lighting systems and lights on timers or sensors are not part of this inspection.

Note: Electromagnetic Fields (EMF) are not checked.

Comments: Recommend a qualified electrician inspect and advise on the complete electrical system.



L. GARAGE / POOL / HOT TUB

KEY:

- ◇ INDICATES TYPE * INDICATES ITEMS THAT REQUIRE ATTENTION / MAINTENANCE
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GARAGE / CARPORT

☐ N/A

☐ ATTACHED

☐ DETACHED

☐ NUMBER OF CARS _____

GARAGE ROOF

☐ Appears Functional

☐ Refer to Page 'D' - Roofing *

☐ Carport roof unvented - add ventilation ports

GARAGE FLOOR

☐ Appears Functional

◇ Concrete

◇ Asphalt

◇ Dirt

◇ Other: _____

☐ Cracking Minor / Major #

☐ Insufficient slope for drainage

☐ Not fully visible due to: _____

☐ Seal Carport Slab / House Junction

FIREWALL / WALLS

☐ Appears Functional

☐ Improper Fire Protected #

◇ Wood

◇ Other: _____

Damaged / Moisture Stains #

NOTE: Determining firewall rating is beyond the scope of this inspection

ELECTRICAL

REFER TO PAGE 'K' - ELECTRICAL

DOOR TO LIVING QUARTERS

◇ Hollow (Non-fire retardant) *

◇ Solid

☐ Appears Functional

☐ Non - Functional Locking Device *

☐ Damaged / Sticking *

☐ No self - closer / recommend one be installed

GARAGE DOOR

◇ Wood

◇ Metal

◇ Other: _____

☐ Appears Functional

☐ Auto Reverse functional / Non - functional #

☐ Automatic

☐ Manual

☐ Electronic Eye Sensor

☐ Recommend Painting of inside of Garage Doors to prevent Moisture absorption *

☐ Recommend testing of auto reverse every 2 months to ensure proper operation - safety *

☐ Occupants belongings block access to all areas of garage - unable to fully inspect *

☐ Minor / Major delamination noted

☐ Door warped / bowing

Comments: _____

★ The garage is used as a storage area. Rotted and needs repair/replacement ★

POOL / HOT TUB

☐ N/A

HEATER

◇ Gas

◇ Electric

◇ Solar Panels (Not Tested)

◇ Oil

☐ Appears Functional

☐ BURNERS:

☐ Inoperative / Pilot Light Off #

☐ Corroded / Rust Flakes / Damaged #

☐ Make: _____

☐ BTU

☐ VENTING:

☐ Appears Functional

☐ Appears Functional

☐ All Burners Not Operational #

☐ Minimal / Blocked / Disconnected / Improper Location

☐ PRESSURE LIMIT SWITCH:

☐ Non - Functional / Delayed / Could Not Determine #

PUMPS/FILTER

◇ Sand Filter

◇ Paper

◇ Other: _____

Pump _____

Pressure Gauge: _____

Circulation: _____

Jet (Hot Tub): _____

Supply Pipes: _____

Make _____

☐ Appears Functional

☐ Appears Functional

☐ Appears Functional

☐ Appears Functional

☐ Deteriorated / Leaking #

☐ Appears Functional

H.P. _____

☐ Non-Functional / Rusting

☐ Non-Functional / Noisy / Leaking * #

☐ Non-Functional / Noisy / Leaking #

◇ Plastic (PVC)

◇ Copper

◇ Flex

☐ PVC Material Too Close To Heater *

☐ Non-Functional / None *

Blowers (Hot Tub): _____

NOTE: Backflush mechanisms are not tested on any filter return *

ELECTRICAL

Location of Breaker:

◇ Main Panel

◇ At Equipment

◇ Other: _____

TYPE OF WIRING:

◇ Rigid Conduit

◇ Seal Tite Flex

◇ Romex #

◇ Other: _____

☐ Single Wired / Frayed conductors / Loose #

POOL / HOT TUB LIGHTS:

G.F.I.:

AIR SWITCH (HOT TUB):

☐ Appears Functional

☐ Appears Functional

☐ Appears Functional

☐ Non-Functional / None / Cannot evaluate #

☐ Non-Functional # / None #

☐ Non-Functional # / None

POOL LAYOUT

◇ Plastic

◇ Aluminum

Coping: ☐ Appears Functional

☐ Lifting / Brittle / Deterioration / Damaged *

☐ Hot Tub cover damaged *

Fencing: ☐ Enclosed Pool

☐ Yes / No

☐ Gate

☐ Latched / Self-close

* Requirements for Pool safety fences / gates vary from Area to Area - Check with local municipality for regulations *

Comments: _____



M. INSPECTION REPORT SUMMARY

This Summary is intended to provide an overview of the Home's major components and NOT as a substitute for reading the Inspection Report in its entirety. Specific recommendations and details on required repairs, further evaluations and maintenance suggestions are discussed in the report. We recommend you follow our "Purchaser's Pre-closing Inspection Checklist".

PAGES	COMPONENT	CONCERNS & QUALITIES OF THIS HOME
A, B	Site / Exterior	Recommend trimming vegetation. Repair fence as necessary.
C	Foundation	No access to underneath rear laundry area.
D	Roof	N/A.
E	Roof / Attic	Roof N/A Attic Roof
F, G, H	Interior Washroom Kitchen	Correct Noted Items.
I	Plumbing	11 yr old water tank. Failure probability is high. Approx 90% galvanized pipe in use.
J	Heating	Electric baseboard heating.
J2	Heat 2 / Cooling	N/A
K	Electrical	Recommend a qualified electrician inspect and advice on the electrical system.
L	Garage Pool / Hot Tub	Rotted and needs repair/replacement. N/A

Additional Investigation Recommended for:

- | | |
|--|--|
| <input type="checkbox"/> Irrigation winterization | <input checked="" type="checkbox"/> Fireplace(s) |
| <input type="checkbox"/> Well / Water | <input type="checkbox"/> Pool / Hot Tub |
| <input type="checkbox"/> Septic System | <input checked="" type="checkbox"/> Pest Control |
| <input type="checkbox"/> Underground Oil Tank | |
| <input type="checkbox"/> Verification of Permits for converted spaces (Bsmt. Suites, Additions, etc.) | |
| <input type="checkbox"/> Any conditions of this home that may affect the underwriting requirements for your Homeowner Policy - eg; % of Galvanized Piping, Oil Tanks, Aluminum Wiring, Amperage of Home etc - Contact your Agent | |

Thank you for using Peers Home Inspections.
Please read your report carefully. Best